

**DEPARTMENT OF HEALTH SERVICES**

1800 3<sup>rd</sup> STREET, ROOM 100  
P. O. BOX 942732  
SACRAMENTO, CA 94234-7320  
(916) 322-1086



CHIP Letter: 01-K  
RHS Letter: 01-K  
Date Issued: November 16, 2001

Dear CHIP/RHS Contact:

The purpose of this letter is to transmit the fiscal year (FY) 2001-02 Standard Agreement for the California Healthcare for Indigents Program (CHIP) and Rural Health Services (RHS) Program.

Enclosed are three copies of the Standard Agreement. The two stamped "ORIGINAL" should be signed by the Chairperson or duly authorized representative of the Governing Board. If a representative signs them, please enclose a copy of the official Board resolution authorizing them to sign for the Board and return as soon as possible to:

California Department of Health Services  
Office of County Health Services  
Attention: County Health Services Unit  
1800 3<sup>rd</sup> Street, Room 100  
P.O. Box 942732  
Sacramento, CA 94234-7320

For your records, you may retain the Agreement stamped "COPY" as an interim document. The Standard Agreement will not be fully executed until the FY 2001-02 CHIP/RHS Description of Proposed Expenditures Report is approved and the Chief of the Office of County Health Services signs the Agreement. One original copy of the Agreement will be returned to you after it has been fully executed.

As a reminder, the continuation of your CHIP/RHS Program payments beyond February are dependent upon the execution of the Standard Agreement and the timely submission and acceptance of a variety of documents/reports as required in the Welfare and Institutions Code. Please refer to CHIP/RHS Letter 01-E (issued on June 1, 2001) for more details on these required documents/reports or visit our website which contains this information (<http://www.dhs.ca.gov/hisp/ochs/chsu/index.htm>).

CHIP/RHS Contacts  
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Thank you for your continuing cooperation. If you have any questions, please contact your County Health Services Analyst at (916) 322-1086.

Sincerely,

**ORIGINAL SIGNED BY TERRY TRINIDAD**

Terry Trinidad, Chief  
County Health Services Unit

Enclosures

cc: Chair, Board of Supervisors (w/out enclosures)  
County Health Officers (w/out enclosures)  
Auditor/Controller (w/out enclosures)

**Standard Agreement**  
**for**  
**California Healthcare for Indigents**  
**Program Funding**  
**for**  
**Fiscal Year 2001-02**

**STANDARD AGREEMENT  
FOR  
CALIFORNIA HEALTHCARE FOR INDIGENTS PROGRAM FUNDING  
FOR  
FISCAL YEAR 2001-02**

The State of California, by and through the Department of Health Services (hereinafter called the "Department") and the County of «County» (hereinafter called the "County") in consideration of the covenants, conditions, agreements, and stipulations hereinafter expressed, do hereby agree as follows:

This Agreement is entered into pursuant to the provisions of the Welfare and Institutions (W&I) Code, Section 16900 et seq. The definitions of terms used in this Agreement shall be determined under W&I Code Section 16900 et seq. In the event of a subsequent statutory amendment or Budget Act language to W&I Code Section 16900 et seq., the amended statute shall be controlling.

As a condition of receiving California Healthcare for Indigents Program funds (hereinafter called CHIP funds), the County agrees to all of the following statutory provisions:

**GENERAL REQUIREMENTS**

1. (a) CHIP funds shall be expended to supplement existing levels of services provided and shall not be used to fund existing levels of services.  
(Section 23 of Chapter 199, Statutes of 1996 - Assembly Bill [AB] 3487)
- (b) CHIP funds shall not be used to support health services provided to persons detained in a county or city jail or other correctional facility.  
(W&I Code Section 16995)
- (c) All providers receiving any CHIP funds shall not require a fee or charge before they render medically necessary services to persons entitled to services supported by CHIP funds.  
(W&I Code Sections 16942(a) and 16804.1)
- (d) Accepting CHIP funds does not relieve the County of its obligation to provide indigent health care as required by W&I Code Section 17000.  
(W&I Code Section 16995.1)
- (e) Facilities receiving CHIP funds shall be required to provide individual notice at the time treatment is sought as to the availability of reduced cost health care and conspicuously post notices of the procedures for applying for reduced cost health care in all emergency rooms and patient waiting rooms for services supported by CHIP funds.  
(W&I Code Sections 16942(a) and 16818)

2. (a) As a condition of receiving CHIP funds, it shall provide, or arrange and pay for, medically necessary follow-up treatment, including prescription drugs and necessary follow-up dental treatment at least equal in scope and frequency to dental services available to Medi-Cal eligible children of the same age, for any condition detected as part of a Child Health and Disability Prevention (CHDP) screen for any child eligible for services under Section 104395 of the Health and Safety Code, if the child was screened by the County, or upon referral by a CHDP Program provider, unless the child is eligible to receive care with no share of cost under the Medi-Cal Program, or is covered under another publicly funded program, or the services are payable under private insurance coverage.  
(W&I Code Sections 16970(a) and (c))
- (b) Noncounty hospitals which receive a formula allocation pursuant to paragraph 10, and physicians who receive payment from the Physician Services (PS) Account of the Emergency Medical Services (EMS) fund, established pursuant to paragraph 25, shall not be required to participate in complying with the CHDP treatment provisions of paragraph 2(a) as a condition of receiving those allocations or payments.  
(W&I Code Section 16970(b)(1))
- (c) Only providers which contract with the County and receive payments of Noncounty Hospital Discretionary, Physician New Contracts, and Other Health Services funds specified in paragraphs 12, 30, and 31 may be required to participate in complying with the CHDP treatment provisions of paragraph 2(a), as a condition of receiving those payments.  
(W&I Code Section 16970(b)(2))
- (d) The CHDP treatment provisions of paragraph 2(a) shall be implemented in consultation and coordination with the County's CHDP Programs.  
(W&I Code Section 16970(d))

### **ADMINISTRATION OF FUNDS**

3. Prior to transferring or expending any CHIP funds received, the County shall:
  - (a) Deposit the CHIP funds received in a special revenue fund or trust fund (hereinafter called the Fund) established solely for the purposes of the provisions of Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code.  
(W&I Code Sections 16909(a) and (b))

- (b) Establish a Hospital Services Account in the Fund and deposit all hospital funds received pursuant to paragraph 9 in that account. The County further assures that it shall establish a Noncounty Hospital Subaccount in the Hospital Services Account and deposit all Noncounty Hospital Formula and Discretionary funds received pursuant to paragraphs 10 and 12, in that subaccount. If the County owns and operates a county hospital, the County further assures that it shall establish a County Hospital Subaccount in the Hospital Services Account and deposit all County Hospital Discretionary funds received pursuant to paragraph 15, in that subaccount.  
(W&I Code Sections 16909(a) and (b))
- (c) Establish a PS Account in the Fund and deposit all PS funds received pursuant to paragraph 24 in that account. The County further assures that it shall establish an EMS Subaccount in the PS Account and deposit all PS funds proposed for expenditure pursuant to paragraph 25, in that subaccount prior to transferring the funds to any other account. If the County chooses to expend Physician New Contracts funds pursuant to paragraph 30, the County assures that it shall establish a Physician New Contracts Subaccount in the PS Account and deposit all Physician New Contracts funds proposed for expenditure pursuant to paragraph 30, in that subaccount.  
(W&I Code Sections 16909(a) and (b))
- (d) Establish an Other Health Services Account in the Fund and deposit all Other Health Services funds received pursuant to paragraph 31, in that subaccount.  
(W&I Code Sections 16909(a) and (b))

#### **INTEREST EARNINGS ON THE FUND**

- 4. (a) All interest earned on the Fund and on each account or subaccount shall be accrued to the benefit of the Fund, account, or subaccount, respectively, and all accrued interest shall be expended for the same purposes as the other funds in the Fund, accounts, or subaccounts, respectively.  
(W&I Code Section 16909(c)(1))
- (b) All interest or other increments earned on the Noncounty Hospitals Subaccount shall be expended on noncounty hospitals pursuant to the provisions of paragraphs 10 and 12.  
(W&I Code Section 16909(c)(2))

### **ADMINISTRATIVE COSTS**

5. County administrative costs associated with the administration of the Fund and each account or subaccount shall be reimbursed from the Fund, account, or subaccount, respectively. The County further assures that it shall not reduce or utilize Noncounty Hospital Formula funds received pursuant to paragraph 10, to offset the costs of administering the Noncounty Hospital Services Subaccount.  
(W&I Code Sections 16909.1 and 16946(b)(1)(E))

### **REPORTING**

6.
  - (a) Information on programs and services which shall receive CHIP funds shall be included in the County's Description of Proposed Expenditures of CHIP Funds and shall be subject to review and approval by the Department for compliance with Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code.  
(W&I Code Section 16980(b)(1))
  - (b) Indigent health care program demographic, expenditure, and utilization data shall be reported as specified by the Department pursuant to the provisions of W&I Code Section 16915 and the procedures specified by the Department.  
(W&I Code Section 16915)
  - (c) Services, associated costs, and socio-demographic characteristics of persons served under W&I Code Section 17000 and persons supported in whole or in part by CHIP funds shall be incorporated into the reports required pursuant to W&I Code Section 16915.  
(W&I Code Section 16942(c))
  - (d) The County shall include an estimate of, and the costs and funding arrangement for, dental services in its Description of Proposed Expenditures of CHIP Funds.  
(W&I Code Section 16980(b)(2))
  - (e) The County shall submit reports which display cost and utilization data for each account in the Fund as specified in the W&I Code Section 16909 to the Department on a preliminary annual and a final annual basis, in a form prescribed by the Department.  
(W&I Code Section 16909(d))

- (f) The County shall provide the Department with information the Department deems necessary to determine compliance with the provisions of Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code. The information shall be provided according to the procedures and due dates established by the Department.  
(W&I Code Section 16981(a))

### **FISCAL ASSURANCES**

- 7. (a) CHIP funds shall be accounted for as revenue in the Description of Proposed Expenditures of CHIP Funds and in other information required by the Department.  
(W&I Code Sections 16990(c) and 16981)
- (b) CHIP funds shall not be used as county matching funds for any other program requiring a county match.  
(W&I Code Section 16990(c))
- (c) The County shall, at a minimum, maintain a level of financial support of county funds for health services as specified in W&I Code Section 16990. This amount shall not include any county funds expended pursuant to W&I Code Section 16809.3. Net disproportionate share hospital revenues shall be included in computing county financial maintenance of effort only as specified in the W&I Code Section 16990.5.  
(W&I Code Sections 16990 and 16990.5)
- (d) In accordance with procedures established by the Department, the County may, upon notifying the Department of the transfers authorized pursuant to W&I Code Section 17600.20, reduce the level of financial maintenance of effort specified in subparagraph (c) above by the amount of funds transferred from the Health Account of the Local Revenue Fund pursuant to W&I Code Section 17600.20 for FY 2001-02.  
(W&I Code Section 16990(a)(2))
- (e) If the County desires to use any of its CHIP allocation for programs and costs not associated with county health services as defined in W&I Code Section 16801, the County, as a condition of using its allocation for these purposes, shall maintain an amount of county funding for those programs and costs at least equal to 1988-89 fiscal year levels.  
(W&I Code Section 16990(b))



### **RECOUPMENT/WITHHOLD**

8. (a) In the event financial support of county funds for health services is less than the amount specified in paragraph 7(c), the Department shall recover the amount of the difference from the CHIP funds provided to the County proportionately from the Hospital Services Account, the PS Account, and the Other Health Services Account.  
(W&I Code Sections 16981(b) and 16990(d))
- (b) In the event financial support of county funds for programs and costs not associated with county health services as defined in W&I Code Section 16801 is less than the FY 1988-89 levels for those services, the Department shall recover the amount of the difference from the CHIP funds provided to the County.  
(W&I Code Sections 16981(b) and 16990(b))
- (c) CHIP funds shall be returned to the Department if they are not encumbered or expended within the fiscal year according to this Agreement, and the requirements of Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the W&I Code.  
(W&I Code Section 16981(b))
- (d) The Department shall withhold payment of any funds specified in this Agreement and W&I Code Section 16900 et seq., if any of the reports specified in this Agreement and W&I Code Section 16900 et seq., have not been received from the County by the dates specified therein, unless an extension for submission of such reports is formally granted by the Department. Any funds withheld from the County pursuant to this Article shall be released upon receipt of the required reports by the Department.  
(W&I Code Sections 16916 and 16942)
- (e) The Department shall conduct fiscal and program reviews to ensure county compliance with the provisions of this Agreement. The Department may withhold funds, up to the total amount of funds allocated under this Agreement, if the county fails to correct deficiencies in the program after receiving written notice of noncompliance from the Department.  
(W&I Code Section 16981(a))

### **HOSPITAL SERVICES**

9. The County agrees to expend all of its 2001-02 Hospital Services allocation received pursuant to W&I Code Section 16943 to support uncompensated services provided during FY 2001-02 by county and noncounty hospitals.  
(W&I Code Sections 16941 and 16943(b)(c)(e) and (f))

### **NONCOUNTY HOSPITAL FORMULA FUNDS**

10. The County agrees to allocate all of its 2001-02 Noncounty Hospital Formula allocation received pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946, to noncounty hospitals within the County in amounts determined pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946 for support of services provided by noncounty hospitals to any eligible patient treated at any time during the FY 2001-02.  
(W&I Code Sections 16945, 16946(a)(1) and (b)(1)(A))
11. (a) Each noncounty hospital's share of Noncounty Hospital Formula funds specified in paragraph 10 shall be distributed to each noncounty hospital within ten (10) working days of receipt of monthly CHIP payments.  
(W&I Code Section 16948(a))  
  
(b) Each noncounty hospital shall provide posted and individual notices pursuant to Section 16818 for the duration of any quarter during which funds allocated pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946 are used.  
(W&I Code Section 16946(b)(1)(D))  
  
(c) Each noncounty hospital shall account for the funds on a quarterly basis.  
(W&I Code Section 16946(b)(1)(B))

### **NONCOUNTY HOSPITAL DISCRETIONARY FUNDS**

12. The County agrees to distribute all of its 2001-02 Noncounty Hospital Discretionary allocation received pursuant to paragraph (2) of subdivision (b) of W&I Code Section 16946 to noncounty hospitals to maintain access to emergency care and to purchase other necessary hospital services provided during FY 2001-02.  
(W&I Code Sections 16945 and 16946(b)(2)(A)(i))
13. The funds specified in paragraph 12 shall be distributed only after consulting with those hospitals and considering the following:
  - (a) The historic and projected patterns of care provided by hospitals, by geographic catchment areas within both urban and nonurban areas.  
(W&I Code Section 16946(b)(2)(B)(i))
  - (b) The unique costs associated with treating disproportionate numbers of severely ill, indigent patients.  
(W&I Code Section 16946(b)(2)(B)(i))

- (c) The disproportionate losses sustained by hospitals in the provision of care.  
(W&I Code Section 16946(b)(2)(B)(i))
  - (d) The patterns of care of its residents provided by Level I trauma care hospitals in contiguous counties and the County may make proportionate allocations to those trauma centers.  
(W&I Code Section 16946(b)(2)(B)(ii))
  - (e) The use of those funds to meet emergency room patient needs and follow-up treatment, including the need for special hospital services.  
(W&I Code Section 16949(c))
14. When contracting with hospitals in neighboring counties for emergency care, the County shall not impose conditions to accept transfers that it does not impose on hospitals within its own boundaries.  
(W&I Code Section 16946(b)(2)(A)(ii))

### **COUNTY HOSPITAL FUNDS**

15. The County agrees to expend all of its 2001-02 County Hospital allocation received pursuant to subdivision (c) of W&I Code Section 16946 for payment or support of services provided in county or noncounty hospitals as determined by the County during FY 2001-02.  
(W&I Code Sections 16945, 16946(a)(2) and (c))

### **REQUIREMENTS**

16. As a condition of receiving the Hospital Services funds specified under paragraph 9, each county and noncounty hospital shall be required to do all of the following:
- (a) Maintain the same number and classification of emergency room permits and trauma facility designations as existed on January 1, 1990. This condition shall be deemed to be met for any hospital that maintained two special permits for basic emergency services on July 1, 1989, if each of the emergency rooms was located on separate campuses of the hospital and was located not more than two miles from the other emergency room. This condition shall also be deemed to be met even if one of the emergency room permits is surrendered after July 1, 1989.  
(W&I Code Sections 16946(d)(1)(A) and (B)(i)(ii))

- (b) In a county that comprises not more than one-half of one percent (1%) of the total state population and in which there is a county hospital and a noncounty hospital with emergency room permits located within two miles of each other, the county hospital may surrender its emergency room permit without penalty for violation of subparagraph (a) above provided all requirements of W&I Code Section 16946(h) are met. If the Department determines that the County is not in compliance with the requirements of subdivision (h) of W&I Code Section 16946 it shall require the County to recover funds and deny further payments pursuant to subdivision (e) of W&I Code Section 16946, until compliance is resumed.  
(W&I Code Section 16946(h))
- (c) Provide data and reports on the use and expenditure of all funds received in a form and according to procedures specified by the County and the Department.  
(W&I Code Section 16946(d)(2))
- (d) Assure that Noncounty Hospital Discretionary and County Hospital Discretionary funds received pursuant to paragraphs 12 and 15 are used only for services for persons who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Section 16946(d)(3))
- (e) Assure that Noncounty Hospital Formula funds allocated pursuant to paragraph 10 are used only for patients who cannot afford to pay or who meet the Office of Statewide Health Planning and Development's (OSHPD) definition of charity care as prescribed under subdivision (d) of Section 128740 of the Health and Safety Code and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16946(d)(3) and 16908.5)
- (f) Cease all current and waive all future collection efforts, by itself and by its agents, to obtain any payment from the patient with respect to whom the services funded with funds specified in paragraph 9 were rendered within ninety (90) days of the receipt of those funds.  
(W&I Code Section 16947(a))
- (g) Notify the County if the hospital receives payment from a patient or responsible third-party payer and reimburse the County in an amount equal to the amount collected from the patient or third-party payer, but not more than the amount of the payment received from the County for the patient's care.  
(W&I Code Section 16947(c))

17. As a condition of receiving the hospital funds specified under paragraph 9, each noncounty hospital shall be required to report to the County within thirty (30) days after the receipt of Noncounty Hospital Formula funds distributed pursuant to paragraph 10, information on patients for whom the distributions shall be used, pursuant to the requirements of W&I Code Section 16909.  
(W&I Code Section 16948(b))
18. Hospitals receiving Noncounty Hospital Discretionary funds under paragraph 12 shall be required to report to the County and OSHPD on any reduction in hospital emergency room specialist capabilities below the level which was provided at that facility on October 2, 1989.  
(W&I Code Section 16949(d))

### **RECOVERY, WITHHOLD, AND SUSPENSION OF PAYMENTS TO HOSPITALS**

19. The County shall recover from any county or noncounty hospital:
  - (a) That portion of funds received which equal the ratio of the number of months the hospital violates the provisions of paragraph 16(a) to twelve (12) months.  
(W&I Code Section 16946(e)(1)(A))
  - (b) All funds received if the hospital violates the provisions of paragraph 16(c).  
(W&I Code Section 16946(e)(1)(B))
  - (c) The difference between the amount received and the amount which the hospital can document that the funds were used according to the provisions of paragraphs 16(d) and 16(e) on a monthly basis.  
(W&I Code Section 16946(e)(1)(C))
20. Further payment of funds may be denied to a hospital which has violated the provisions of paragraphs 16 through 18 until the hospital demonstrates compliance.  
(W&I Code Section 16946(e)(2))
21. Payments to any noncounty hospital shall be suspended if the hospital fails to provide the information required in paragraph 17.  
(W&I Code Section 16948(c))

### **REALLOCATION AND REDISTRIBUTION**

22. Funds withheld or recovered pursuant to paragraph 19 may be reallocated and distributed according to the Noncounty Hospital Discretionary provisions contained in paragraphs 12 and 13.  
(W&I Code Section 16946(f))

23. Noncounty Hospital Formula and Discretionary funds available for allocation or distribution pursuant to paragraphs 10 and 12, which are not expended because a hospital does not participate shall be redistributed pursuant to the Noncounty Hospital Discretionary provisions contained in paragraph 12. If no noncounty hospitals remain to participate, the County may distribute the unexpended funds pursuant to the County Hospital Discretionary provisions contained in paragraph 15.  
(W&I Code Section 16946(g))

### **PHYSICIAN SERVICES**

24. The County agrees to expend all of its 2001-02 PS allocation received pursuant to subdivision (a) of W&I Code Section 16950, for the support of or payment for uncompensated services provided during FY 2001-02 by a licensed physician.  
(W&I Code Sections 16908, 16941 and 16950(a))

### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT**

25. As a condition of receiving CHIP funds, the County shall:
- (a) Establish an EMS fund as authorized by subdivision (a) of Health and Safety Code Section 1797.98a. This shall not be interpreted to require the County to impose the assessment authorized by Section 1465.5 of the Penal Code.  
(W&I Code Section 16951)
  - (b) Establish a PS Account within the EMS fund and deposit in the PS Account at least fifty percent (50%) of the PS amount specified in paragraph 24 and any other funds appropriated by the Legislature for the purposes of the PS Account of the EMS fund.  
(W&I Code Sections 16950(c) and 16952(a)(1))
  - (c) Funds deposited in the PS Account in the EMS fund are exempt from the percentage allocations set forth in subdivision (a) of Section 1797.98a of the Health and Safety Code.  
(W&I Code Section 16952(b))

### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT PURPOSE AND USE OF FUNDS**

26. The PS Account in the EMS fund shall be used to reimburse physicians for losses incurred for services provided during FY 2001-02 and the County shall:  
(W&I Code Section 16952(f))

- (a) Limit reimbursement to emergency services, as defined in W&I Code Section 16953, obstetric services, as defined in W&I Code Section 16905.5, and pediatric services, as defined in W&I Code Section 16907.5.  
(W&I Code Section 16952(g)(1))
- (b) Reimburse each physician for no more than fifty percent (50%) of the losses submitted.  
(W&I Code Section 16952(h))
- (c) Not reimburse for physician services provided by physicians employed by county hospitals.  
(W&I Code Section 16952(b))
- (d) Not reimburse any physician who provides physician services in a primary care clinic which receives funds pursuant to Part 4 of Division 106 of the Health and Safety Code commencing with Section 124900.  
(W&I Code Section 16952(b))
- (e) Limit reimbursement for losses incurred by any physician for services provided to patients who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government, and where all of the following conditions have been met:  
(W&I Code Sections 16952(f) and (g))
  - (i) The physician has inquired if there is a responsible third-party source of payment.  
(W&I Code Section 16955(a))
  - (ii) The physician has billed for payment of services.  
(W&I Code Section 16955(b))
  - (iii) A period of not less than three months has passed from the date the physician billed the patient or responsible third-party, during which time the physician has made reasonable efforts to obtain reimbursement and has not received reimbursement for any portion of the amount billed, or the physician has received actual notification from the patient or responsible third-party that no payment shall be made for the services rendered by the physician.  
(W&I Code Section 16955(c))

- (iv) The physician has stopped any current, and waives any future, collection efforts to obtain reimbursement from the patient, upon receipt of funds from the County PS Account in the County EMS fund.  
(W&I Code Section 16955(d))

**EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT  
ADMINISTRATIVE COSTS**

- 27. The County shall expend no more than ten percent (10%) of the amount deposited in the PS Account of the EMS fund pursuant to paragraph 25 for costs of administering the PS Account.  
(W&I Code Section 16952(d))

**EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT  
EXPENDITURES**

- 28. The County shall provide a reasonable basis for its estimate of PS Account funds in the EMS fund which are encumbered to reimburse physicians losses incurred during the fiscal year for which bills shall not be received until after the fiscal year and agrees to expend or disencumber these funds prior to the submission of the report of actual expenditures required by W&I Code Section 16980 (b).  
(W&I Code Section 16952(a)(2))

**EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT  
PROCEDURES**

- 29. The County shall:
  - (a) Establish procedures and time schedules for submission and processing of reimbursement claims submitted by physicians.  
(W&I Code Section 16956(a))
  - (b) Establish schedules for payment which shall provide for disbursement of the funds available in the PS Account of the EMS fund periodically and at least annually to all physicians who have submitted claims containing accurate and complete data for payment by the dates established by the County.  
(W&I Code Section 16956(b))
  - (c) Deny, at its discretion, claims which are not supported by records and recover any reimbursement paid to any physician for claims which lack supporting records.  
(W&I Code Section 16956(c))



- (d) Require a listing of patient names to accompany a physician's claim, and give full confidentiality protection to those names.  
(W&I Code Section 16956(e))
- (e) Require physicians to notify the administering agency if, after receiving payment from the PS Account of the EMS fund, the physicians are reimbursed by patients or responsible third-parties. In these instances the County assures that it shall reduce the physician's future payment of claims from the account or, in the event there is not a subsequent submission of a claim for reimbursement within one year, require the physicians to reimburse the PS Account of the EMS fund in an amount equal to the amount collected from the patient or third-party payer but not greater than the amount of reimbursement received from the PS Account of the EMS fund for the patient's care.  
(W&I Code Section 16958)
- (f) Require physicians who submit claims for funding from the PS Account of the EMS fund to keep and maintain records of the services rendered, the person to whom services were rendered, and any additional information the administering agency may require, for a period of three years after the services were provided.  
(W&I Code Section 16957)

### **NEW CONTRACTS**

- 30. (a) The difference between the physician services amount received in paragraph 24 and the amount transferred to the PS Account of the EMS fund pursuant to paragraph 25 shall be expended by the County to pay for new contracts during FY 2001-02 with private physicians for provision of emergency, obstetric, and pediatric services in facilities which are not owned or operated by a county, and where access to those services has been severely restricted.  
(W&I Code Section 16950(b))
- (b) The County shall require physicians who receive funds specified in subparagraph (a) to stop any current, and waive any future, collection efforts to obtain reimbursement from the patient, upon receipt of funds from the County. The contracts may provide for partial or full reimbursement for physician services provided to patients who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Section 16950(b))

### **OTHER HEALTH SERVICES FUNDS - PURPOSE**

31. The County agrees to expend all of its 2001-02 Other Health Services allocation received pursuant to W&I Code Section 16960 to maintain and enhance health care services which are:
- (a) Provided during FY 2001-02.
  - (b) Specified in W&I Code Sections 14021 and 14132, and in former Division 1 (commencing with Section 100) and the Communicable Disease Prevention and Control Act as set forth in subdivision (a) of Section 27, of the Health and Safety Code.
  - (c) Provided to patients who cannot afford to pay for those services, and for whom payment shall not be made through private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16941, 16960(a) and 16961)

### **OTHER HEALTH SERVICES FUNDS - CONSIDERATIONS AND LIMITATIONS**

32. No more than five percent (5%) of the Other Health Services funds specified in paragraph 31 or fifty thousand dollars (\$50,000), whichever is greater, shall be expended for costs related to the purchase of equipment and fixed assets and that no single expenditure shall exceed ten thousand dollars (\$10,000).  
(W&I Code Section 16960(b))
33. Consideration shall be given to city public health departments within the County in the use of Other Health Services funds specified in paragraph 31.  
(W&I Code Section 16960(a))

### **CONTRACTUAL CONSIDERATIONS AND LIMITATIONS**

34. The Department or County may terminate this Agreement by giving at least thirty (30) days written notice to the other party. The notification shall state the effective date of termination.
35. Nothing in this Agreement shall be interpreted to require additional expenditures of County funds for health services beyond those required herein. Also, nothing in this Agreement shall be interpreted to relieve the County of its other obligations to provide health care services to its residents.
36. The Agreement may be amended to conform to any applicable changes in the statutes governing the funds and programs covered in this Agreement.

37. Section 86 of SB 391 (Chapter 294, Statutes of 1997) is hereby incorporated by reference into this Agreement. Reductions in appropriations for CHIP pursuant to Section 86 shall be prorated among the CHIP Counties and the allocations under paragraphs 9, 10, 12, 15, 24, and 31, shall be reduced accordingly upon notification by the Department.

### **APPEAL PROCESS**

38. The County may appeal a decision involving CHIP by writing to the Department within twenty-one (21) working days of receipt of written notification. The County's appeal shall be directed to the Department's Chief of the Medically Indigent Services Section. The appeal must clearly describe the issue(s) in question, the fiscal year applicable and include all supporting documentation. The Department shall issue a written decision to the County. The County may, within twenty-one (21) working days of receipt of this decision, pursue a second level appeal. The County must direct the second level appeal to the Department's Chief of the Office of County Health Services. The second level appeal must clearly describe the issue(s) in question, the fiscal year applicable, and include all supporting documentation. The Chief of the Office of County Health Services has the authority to overrule any part or all of the first level appeal decision. The second level appeal decision is precedent and overrules the first level appeal decision. The Department shall issue a written decision to the County. There is no other level of appeal within the Department.

**THIS AGREEMENT FOR FUNDING HAS BEEN SIGNED BY THE COUNTY'S GOVERNING BODY AND IS HEREBY EXECUTED.**

<b>State of California</b>	<b>County of «County»</b>
<b>Signature:</b>	<b>Signature:</b>
<b>Name: George B. (Peter) Abbott, M.D., M.P.H.</b>	<b>Name:</b>
<b>Title: Chief, Office of County Health Services</b>	<b>Title:</b>
<b>Date:</b>	<b>Date:</b>

**Standard Agreement**  
**for**  
**Rural Health Services**  
**Program Funding**  
**for**  
**Fiscal Year 2001-02**

**STANDARD AGREEMENT  
FOR  
RURAL HEALTH SERVICES PROGRAM FUNDING  
FOR  
FISCAL YEAR 2001-02**

The State of California, by and through the Department of Health Services (hereinafter called the "Department") and the County of «County» (hereinafter called the "County") in consideration of the covenants, conditions, agreements, and stipulations hereinafter expressed, do hereby agree as follows:

This Agreement is entered into pursuant to the provisions of the Welfare and Institutions (W&I) Code Section 16900 et seq. The definitions of terms used in this Agreement shall be determined under W&I Code Section 16900 et seq. In the event of a subsequent statutory amendment or Budget Act language to W&I Code Section 16900 et seq., the amended statute shall be controlling.

As a condition of receiving Rural Health Services funds (hereinafter called RHS funds), the County agrees to all of the following statutory provisions:

**GENERAL REQUIREMENTS**

1. (a) RHS funds shall be expended to supplement existing levels of services provided and shall not be used to fund existing levels of services.  
(Section 23 of Chapter 199, Statutes of 1996 - Assembly Bill [AB] 3487)
- (b) RHS funds shall not be used to support health services provided to persons detained in a county or city jail or other correctional facility.  
(W&I Code Sections 16939 and 16995)
- (c) All providers receiving any RHS funds shall not require a fee or charge before rendering medically necessary services to persons entitled to services supported by RHS funds.  
(W&I Code Sections 16931(b) and 16804.1)
- (d) Accepting RHS funds does not relieve the County of its obligation to provide indigent health care as required by W&I Code Section 17000.  
(W&I Code Sections 16939 and 16995.1)
- (e) Facilities receiving RHS funds shall be required to provide individual notice at the time treatment is sought as to the availability of reduced cost health care and conspicuously post notices of the procedures for applying for reduced cost health care in all emergency rooms and patient waiting rooms for services supported by RHS funds.  
(W&I Code Section 16931(b))

- (f) For FY 2001-02, any county that did not participate in the County Medical Services Program (CMSP) in FY 1990-91 and elects to participate in CMSP pursuant to W&I Code Section 16809 of subdivision (b) shall have the amounts allocated to that county transferred as follows:
  - (i) Of the moneys allocated from the Hospital Services Account pursuant to W&I Code Section 16943, seven-seventeenths of the transferable amount shall be transferred to the Hospital Services Account governed by W&I Code Section 16932. The remainder of this amount shall be transferred to the CMSP Account and shall be utilized for the purposes specified in W&I Code Section 16809.5.
  - (ii) Of the moneys allocated from the Physician Services (PS) Account pursuant to W&I Code Section 16950, seven-seventeenths of the transferable amount shall be transferred to the PS Account governed by W&I Code Section 16933. The remainder of this amount shall be transferred to the CMSP Account and shall be utilized for the purposes specified in W&I Code Section 16809.5.
  - (iii) Of the moneys allocated from the Unallocated Account governed by W&I Code Section 16960, seven-seventeenths of the transferable amount shall be transferred to the Unallocated Account governed by the provisions of W&I Code Section 16933. The remainder of this amount shall be transferred to the CMSP Account and shall be utilized for the purposes specified in W&I Code Section 16809.5.
  - (iv) Except as provided in subparagraph (b) of this paragraph, funds transferred pursuant to this section shall be subject to all applicable statutes.
- 2. (a) Unless the County enters into a contract with the Department pursuant to W&I Code Section 16934.5, as a condition of receiving RHS funds, it shall provide, or arrange and pay for, medically necessary follow-up treatment, including necessary follow-up dental services and prescription drugs, for any condition detected as part of a Child Health and Disability Prevention (CHDP) screen for a child eligible for services under Section 104395 of the Health and Safety Code, if the child was screened by the County, or upon referral by a CHDP Program provider. This shall not apply to any child eligible to receive care with no share of cost under the Medi-Cal Program or who is covered by another publicly funded program or for whom these services are covered or shall be paid by any other responsible party. Dental services provided shall be at least equal in scope and frequency to dental services available to Medi-Cal eligible children of the same age.  
(W&I Code Sections 16934(a) and (b))

- (b) Noncounty hospitals which receive a formula allocation pursuant to paragraph 10 and physicians who receive payment from the PS Account of the Emergency Medical Services (EMS) fund established pursuant to paragraph 26, shall not be required to participate in complying with the CHDP treatment provisions of paragraph 2(a) as a condition of receiving those allocations or payments.  
(W&I Code Section 16934(a))
- (c) Only providers which contract with the County and receive payments of Noncounty Hospital Discretionary, Physician New Contracts, and Other Health Services funds specified in paragraphs 12, 31, and 33 may be required to participate in complying with the CHDP treatment provisions of paragraph 2(a) as a condition of receiving those payments.  
(W&I Code Section 16934(a))
- (d) The CHDP treatment provisions of paragraph 2(a) shall be implemented in consultation and coordination with the County's CHDP Program.  
(W&I Code Section 16934(c))
- (e) Should the County choose to enter into a contract with the Department under W&I Code Section 16934.5 through which the Department agrees to assume the responsibility to pay for the cost of treatment services provided pursuant to W&I Code Section 16934, the County shall:
  - (i) Comply with uniform standards, forms, and procedures established by the Department for the processing and payment of claims for treatment services.  
(W&I Code Section 16934.5(a)(1))
  - (ii) Permit the Department to retain 10 percent (10%) of the total RHS allocations in paragraphs 9, 25, and 33 if the County has previously contracted under W&I Code Section 16934.5.  
(W&I Code Section 16934.5(a)(2)(A))
  - (iii) Permit the Department to retain 20 percent (20%) of the total of the RHS allocations in paragraphs 9, 25, and 33 if the County has not previously contracted under W&I Code Section 16934.5.  
(W&I Code Section 16934.5(a)(2)(B))
  - (iv) The percentage retained by the Department may be adjusted to reflect actual payments, projected expenditures, funds appropriated by the Legislature for treatment services, and the overall status of the account established in W&I Code Section 16934.5(b).  
(W&I Code Section 16934.5(a)(3))

### **ADMINISTRATION OF FUNDS**

3. Prior to transferring or expending any RHS funds received, the County shall:
  - (a) Deposit the RHS funds received in a special revenue fund or trust fund (hereinafter called the Fund) established solely for the purposes of the provisions of Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code. (W&I Code Sections 16909(a) and (b))
  - (b) Establish a Hospital Services Account in the Fund and deposit all hospital funds received pursuant to paragraph 9 in that account. The County further assures that it shall establish a Noncounty Hospital Subaccount in the Hospital Services Account and deposit all Noncounty Hospital Formula and Discretionary funds received pursuant to paragraphs 10 and 12 in that subaccount. If the County owns and operates a county hospital, the County further assures that it shall establish a County Hospital Subaccount in the Hospital Services Account and deposit all County Hospital Discretionary funds received pursuant to paragraph 15 in that subaccount. (W&I Code Sections 16909(a) and (b))
  - (c) Establish a PS Account in the Fund and deposit all PS funds received pursuant to paragraph 25 in that account. If the County chooses to use some or all of the PS funds specified in paragraph 25 to establish an EMS fund, it shall establish an EMS Subaccount in the PS Account and deposit all PS funds proposed for expenditure pursuant to paragraph 27 in that subaccount prior to transferring the funds to any other account. If the County chooses to expend Physician New Contracts funds pursuant to paragraph 31, the County shall establish a Physician New Contracts Subaccount in the PS Account and deposit all other PS funds proposed for expenditure pursuant to paragraph 31 in that subaccount. (W&I Code Sections 16909(a) and (b))
  - (d) Establish an Other Health Services Account in the Fund and deposit all Other Health Services funds received pursuant to paragraph 33 in that subaccount. (W&I Code Sections 16909(a) and (b))

### **INTEREST EARNINGS ON THE FUND**

4. (a) All interest earned on the Fund and on each account or subaccount shall be accrued to the benefit of the Fund, account, or subaccount, respectively, and all accrued interest shall be expended for the same purposes as the other funds in the Fund, accounts, or subaccounts, respectively. (W&I Code Section 16909(c)(1))



- (b) All interest or other increments earned on the Noncounty Hospitals Subaccount shall be expended on noncounty hospitals pursuant to the provisions of paragraphs 10 and 12.  
(W&I Code Section 16909(c)(2))

### **ADMINISTRATIVE COSTS**

- 5. County administrative costs associated with the administration of the Fund and each account or subaccount shall be reimbursed from the Fund, account, or subaccount, respectively. The County further assures that it shall not reduce or utilize Noncounty Hospital Formula funds received pursuant to paragraph 10, to offset the costs of administering the Noncounty Hospital Services Subaccount.  
(W&I Code Sections 16909.1 and 16946(b)(1)(E))

### **REPORTING**

- 6. (a) Information on programs and services which shall receive RHS funds shall be included in the County's Description of Proposed Expenditures of RHS Funds and shall be subject to review and approval by the Department for compliance with Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code.  
(W&I Code Sections 16936(a)(1) and 16980(b)(1))
- (b) Indigent health care program demographic, expenditure, and utilization data shall be reported as specified by the Department pursuant to the provisions of W&I Code Section 16915 and the procedures specified by the Department.  
(W&I Code Section 16915)
- (c) Services, associated costs, and socio-demographic characteristics of persons served under W&I Code Section 17000 and persons supported in whole or in part by RHS funds shall be incorporated into the reports required pursuant to W&I Code Section 16915.  
(W&I Code Section 16937)
- (d) The County shall include an estimate of, and the costs and funding arrangement for, dental services in its Description of Proposed Expenditures of RHS funds.  
(W&I Code Sections 16939 and 16980(b)(2))
- (e) The County shall submit reports which display cost and utilization data for each account in the Fund as specified in the W&I Code Section 16909 to the Department on a preliminary annual and final annual basis in a form prescribed by the Department.  
(W&I Code Section 16909(d))

- (f) The County shall provide the Department with information the Department deems necessary to determine compliance with the provisions of Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code. The information shall be provided according to the procedures and due dates established by the Department.  
(W&I Code Section 16981)

### **FISCAL ASSURANCES**

- 7. (a) RHS funds shall be accounted for as revenue in the Description of Proposed Expenditures of RHS Funds and any other information required by the Department.  
(W&I Code Sections 16939 and 16990(c))
- (b) RHS funds shall not be used as county matching funds for any other program requiring a county match.  
(W&I Code Sections 16939 and 16990(c))
- (c) The County shall, at a minimum, maintain a level of financial support of county funds for health services as specified in W&I Code Section 16990. This amount shall not include any county funds expended pursuant to W&I Code Section 16809.3. Net disproportionate share hospital revenues shall be included in computing county financial maintenance of effort only as specified in W&I Code Section 16990.5.  
(W&I Code Sections 16990 and 16990.5)
- (d) In accordance with procedures established by the Department, the County may, upon notifying the Department of the transfers authorized pursuant to W&I Code Section 17600.20, reduce the level of financial maintenance of effort specified in subparagraph (c) by the amount of funds transferred from the Health Account of the Local Revenue Fund pursuant to W&I Code Section 17600.20 for FY 2001-02.  
(W&I Code Section 16990(a)(2))
- (e) If the County desires to use any of its RHS allocation for programs and costs not associated with county health services as defined in W&I Code Section 16801, the County, as a condition of using its allocation for these purposes, shall maintain an amount of county funding for those programs and costs at least equal to the 1988-89 fiscal year levels.  
(W&I Code Section 16990(b))

### **RECOUPMENT/WITHHOLD**

8. (a) In the event financial support of county funds for health services is less than the amount specified in paragraph 7(c), the Department shall recover the amount of the difference from the RHS funds provided to the County proportionately from the Hospital Services Account, the PS Account, and the Other Health Services Account.  
(W&I Code Sections 16938(b), 16939, 16981(b) and 16990(d))
- (b) In the event financial support of county funds for programs and costs not associated with county health services as defined in W&I Code Section 16801 is less than the FY 1988-89 levels for those services, the Department shall recover the amount of the difference from the RHS funds provided to the County.  
(W&I Code Sections 16938(b), 16939, 16981(b) and 16990(b))
- (c) RHS funds shall be returned to the Department if they are not encumbered or expended within the fiscal year according to this Agreement, and the requirements of Chapter 4 (commencing with Section 16930) of Part 4.7 of Division 9 of the W&I Code.  
(W&I Code Section 16981(b))
- (d) The Department shall withhold, in part or in whole, payment of any funds specified in this Agreement and W&I Code Section 16900 et seq., if any of the reports specified in this Agreement and W&I Code Section 16900 et seq., have not been received from the County by the dates specified therein, unless an extension for submission of such reports is formally granted by the Department. Any funds withheld from the County pursuant to this Article shall be released upon receipt of the required reports by the Department.  
(W&I Code Section 16916)
- (e) The Department shall conduct fiscal and program reviews to ensure county compliance with the provisions of this Agreement. The Department may withhold funds, up to the total amount of funds allocated under this Agreement, if the County fails to correct deficiencies in the program after receiving written notice of noncompliance from the Department.  
(W&I Code Section 16981(a))

### **HOSPITAL SERVICES**

9. The County agrees to expend the total amount of its 2001-02 Hospital Services allocation received pursuant to W&I Code Section 16932 to support uncompensated services provided during FY 2001-02 by county and noncounty hospitals.  
(W&I Code Sections 16932 and 16946)

### **NONCOUNTY HOSPITAL FORMULA FUNDS**

10. The County agrees to allocate all of its 2001-02 Noncounty Hospital Formula allocation received pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946 to noncounty hospitals within the County in amounts determined pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946 for support of services provided by noncounty hospitals to any eligible patient treated at any time during FY 2001-02.  
(W&I Code Sections 16932(a) and (c), 16946(a)(1) and (b)(1)(A))
11. (a) Each noncounty hospital's share of Noncounty Hospital Formula allocation specified in paragraph 10 shall be distributed to each noncounty hospital within ten (10) working days of receipt of monthly RHS payments.  
(W&I Code Sections 16932(c) and 16948(a))  
  
(b) Each noncounty hospital shall provide posted and individual notices pursuant to Section 16818 for the duration of any quarter during which funds allocated pursuant to paragraph (1) of subdivision (b) of W&I Code Section 16946 are used.  
(W&I Code Sections 16932(c) and 16946(b)(1)(D))  
  
(c) Each noncounty hospital shall account for the funds on a quarterly basis.  
(W&I Code Sections 16932(c) and 16946(b)(1)(B))

### **NONCOUNTY HOSPITAL DISCRETIONARY FUNDS**

12. The County agrees to distribute all of its 2001-02 Noncounty Hospital Discretionary allocation received pursuant to paragraph (2) of subdivision (b) of W&I Code Section 16946 to noncounty hospitals to maintain access to emergency care and to purchase other necessary hospital services provided during FY 2001-02.  
(W&I Code Sections 16932(a) and (c), and 16946(a)(1) and (b)(2)(A)(i))
13. The funds specified in paragraph 12 shall be distributed only after consulting with those hospitals and considering the following:
  - (a) The historic and projected patterns of care provided by hospitals, by geographic catchment areas within both urban and nonurban areas.  
(W&I Code Sections 16932(c) and 16946(b)(2)(B)(i))
  - (b) The unique costs associated with treating disproportionate numbers of severely ill, indigent patients.  
(W&I Code Sections 16932(c) and 16946(b)(2)(B)(i))
  - (c) The disproportionate losses sustained by hospitals in the provision of care.  
(W&I Code Sections 16932(c) and 16946(b)(2)(B)(i))

- (d) The patterns of care of its residents provided by Level I trauma care hospitals in contiguous counties and the County may make proportionate allocations to those trauma centers.  
(W&I Code Sections 16932(c) and 16946(b)(2)(B)(ii))
  - (e) The use of those funds to meet emergency room patient needs and follow-up treatment, including the need for special hospital services.  
(W&I Code Sections 16932(c) and 16949(c))
14. When contracting with hospitals in neighboring counties for emergency care, the County shall not impose conditions to accept transfers that it would not impose on hospitals within its own boundaries.  
(W&I Code Section 16946(b)(2)(A)(ii))

#### **COUNTY AND NONCOUNTY HOSPITAL DISCRETIONARY FUNDS**

15. The County agrees to expend all of its 2001-02 County Hospital allocation received pursuant to subdivision (c) of W&I Code Section 16946 for payment or support of services provided in county or noncounty hospitals as determined by the County during FY 2001-02.  
(W&I Code Sections 16932, 16945 and 16946(a)(2) and (c))

#### **REQUIREMENTS**

16. As a condition of receiving the Hospital Services funds specified under paragraph 9, each county and noncounty hospital shall be required to do all of the following:
- (a) Maintain the same number and classification of emergency room permits and trauma facility designations as existed on January 1, 1990. This condition shall be deemed to be met for any hospital that maintained two special permits for basic emergency services on July 1, 1989, if each of the emergency rooms was located on separate campuses of the hospital and was located not more than two miles from the other emergency room. This condition shall also be deemed to be met even if one of the emergency room permits is surrendered after July 1, 1989.  
(W&I Code Sections 16932, 16946(d)(1)(A) and (B)(i)(ii))
  - (b) In a county that comprises not more than one-half of one percent (1%) of the total state population and in which there is a county hospital and a noncounty hospital with emergency room permits located within two miles of each other, the county hospital may surrender its emergency room permit without penalty for violation of subparagraph (a) above provided all requirements of W&I Code Section 16946(h) are met. If the Department determines that the County is not

in compliance with the requirements of subdivision (h) of W&I Code Section 16946 it shall require the County to recover funds and deny further payments pursuant to subdivision (e) of W&I Code Section 16946 until compliance is resumed.

(W&I Code Section 16946(h))

- (c) Provide data and reports on the use and expenditure of all funds received in a form and according to procedures specified by the County and the Department.  
(W&I Code Sections 16932 and 16946(d)(2))
  - (d) Assure that Noncounty Hospital Discretionary and County Hospital Discretionary funds received pursuant to paragraphs 12 and 15 are used only for services for persons who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16932 and 16946(d)(3))
  - (e) Assure that Noncounty Hospital Formula funds allocated pursuant to paragraph 10 are used only for patients who cannot afford to pay or who meet the Office of Statewide Health Planning and Development's (OSHDP) definition of charity care as prescribed under subdivision (d) of Section 128740 of the Health and Safety Code and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16932, 16946(d)(3) and 16908.5)
  - (f) Cease all current and waive all future collection efforts, by itself and by its agents, to obtain any payment from the patient with respect to whom the services funded with funds specified in paragraph 9 were rendered within ninety (90) days of the receipt of those funds.  
(W&I Code Sections 16932 and 16947(a))
  - (g) Notify the County if the hospital receives payment from a patient or responsible third-party payer and reimburse the County in an amount equal to the amount collected from the patient or third-party payer, but not more than the amount of the payment received from the County for the patient's care.  
(W&I Code Sections 16932 and 16947(c))
17. As a condition of receiving the hospital funds specified under paragraph 10, each noncounty hospital shall be required to report to the County within thirty (30) days after the receipt of Noncounty Hospital Formula funds distributed pursuant to paragraph 11, information on patients for whom the distributions shall be used, pursuant to the requirements of W&I Code Section 16909.  
(W&I Code Section 16948(b))

18. Hospitals receiving Noncounty Hospital Discretionary funds under paragraph 12 shall be required to report to the County and OSHPD on any reduction in hospital emergency room specialist capabilities below the level which was provided at that facility on October 2, 1989.  
(W&I Code Sections 16932 and 16949(d))

### **RECOVERY, WITHHOLD, AND SUSPENSION OF PAYMENTS TO HOSPITALS**

19. The County shall recover from any county or noncounty hospital:
- (a) That portion of funds received which equal the ratio of the number of months the hospital violates the provisions of paragraph 16(a) to twelve (12) months.  
(W&I Code Sections 16932 and 16946(e)(1)(A))
  - (b) All funds received if the hospital violates the provisions of paragraph 16(c).  
(W&I Code Sections 16932 and 16946(e)(1)(B))
  - (c) The difference between the amount received and the amount which the hospital can document that the funds were used according to the provisions of paragraphs 16(d) and 16(e) on a monthly basis.  
(W&I Code Sections 16932 and 16946(e)(1)(C))
20. Further payment of funds may be denied to a hospital which has violated the provisions of paragraphs 16 through 18 until the hospital demonstrates compliance.  
(W&I Code Sections 16932 and 16946(e)(2))
21. Payments to any noncounty hospital shall be suspended if the hospital fails to provide the information required in paragraph 17.  
(W&I Code Sections 16932 and 16948(c))

### **REALLOCATION AND REDISTRIBUTION**

22. Funds withheld or recovered pursuant to paragraph 19 may be reallocated and distributed according to the Noncounty Hospital Discretionary provisions contained in paragraphs 12 and 13.  
(W&I Code Sections 16932 and 16946(f))
23. Noncounty Hospital Formula and Discretionary funds available for allocation or distribution pursuant to paragraphs 10 and 12, which are not expended because a hospital does not participate shall be redistributed pursuant to the Noncounty Hospital Discretionary provisions contained in paragraph 12. If no noncounty hospitals remain to participate, the County may distribute the unexpended funds pursuant to the County Hospital Discretionary provisions contained in paragraph 15.  
(W&I Code Sections 16932 and 16946(g))

### **HOSPITAL SERVICES ACCOUNT - CONTRACT BACK**

24. Should the County choose to contract back with the Department to administer its Hospital Services Account, it shall:
- (a) Assure that the Department shall retain all noncounty hospital funds specified in paragraphs 10 and 12 if the County contracts back with the Department for CHDP treatment administration, or all Noncounty Hospital Formula funds specified in paragraph 10 if the County does not contract back with the Department for CHDP treatment administration.  
(W&I Code Sections 16932, 16934.7(a)(b)(d) and 16946)
  - (b) Assure that the Department shall act on behalf of the County and shall assume all Program responsibilities for administering the distribution and monitoring of funds allocated from the Hospital Services Account for county and noncounty hospitals.  
(W&I Code Sections 16934.7(a)(b)(e) and 16946)

### **PHYSICIAN SERVICES**

25. The County agrees to expend all of its 2001-02 PS allocation received pursuant to subdivision (c) of W&I Code Section 16933 to provide medically necessary emergency, obstetric, or pediatric services, or all of them, to patients who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16933(a) and (c))

### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT**

26. Should the County choose to use some or all of the PS allocation specified in paragraph 25 to establish an EMS fund, it shall:
- (a) Establish an EMS fund as authorized by subdivision (a) of Health and Safety Code Section 1797.98a. This shall not be interpreted to require the County to impose the assessment authorized by Section 1465.5 of the Penal Code.  
(W&I Code Sections 16933(c)(1) and 16951)
  - (b) Establish a PS Account within the EMS fund and deposit in the PS Account that portion of the PS fund specified in paragraph 25, that it has chosen to use for the EMS fund and any other funds appropriated by the Legislature for the purposes of the PS Account of the EMS fund.  
(W&I Code Sections 16933(c)(1), 16951 and 16952(a)(1))



- (c) Funds deposited in the PS Account in the EMS fund are exempt from the percentage allocations set forth in subdivision (a) of Section 1797.98a of the Health and Safety Code.

(W&I Code Sections 16933(c)(1) and 16952(b))

**EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT**  
**PURPOSE AND USE OF FUNDS**

27. Should the County choose to use some or all of the PS funds specified in paragraph 25 of this Article to establish an EMS fund, the PS Account in the EMS fund shall be used to reimburse physicians for losses incurred for services provided during FY 2001-02 and the County shall:

(W&I Code Sections 16933(c)(1) and (d), and 16952(f))

- (a) Limit reimbursement to emergency services, as defined in W&I Code Section 16953, obstetric services, as defined in W&I Code Section 16905.5, and pediatric services, as defined in W&I Code Section 16907.5.

(W&I Code Sections 16933(c)(1) and 16952(g)(1))

- (b) Reimburse each physician for no more than fifty percent (50%) of the losses submitted.

(W&I Code Sections 16933(c)(1) and 16952(h))

- (c) Not reimburse for physician services provided by physicians employed by county hospitals.

(W&I Code Sections 16933(c)(1) and 16952(b))

- (d) Not reimburse any physician who provides physician services in a primary care clinic which receives funds pursuant to Part 4 of Division 106 of the Health and Safety Code commencing with Section 124900.

(W&I Code Sections 16933(c)(1) and 16952(b))

- (e) Limit reimbursement for losses incurred by any physician to services provided to patients who cannot afford to pay for those services, and for whom payment shall not be made through any private coverage or by any program funded in whole or in part by the federal government, and where all of the following conditions have been met:

(W&I Code Sections 16933(c)(1) and 16952(f))

- (i) The physician has inquired if there is a responsible third-party source of payment.

(W&I Code Sections 16933(c)(1) and 16955(a))

- (ii) The physician has billed for payment of services.

(W&I Code Sections 16933(c)(1) and 16955(b))

- (iii) A period of not less than three months has passed from the date the physician billed the patient or responsible third-party, during which time the physician has made reasonable efforts to obtain reimbursement and has not received reimbursement for any portion of the amount billed, or the physician has received actual notification from the patient or responsible third-party that no payment shall be made for the services rendered by the physician.

(W&I Code Sections 16933(c)(1) and 16955(c))

- (iv) The physician has stopped any current, and waives any future, collection efforts to obtain reimbursement from the patient, upon receipt of funds from the County PS Account in the County EMS fund.

(W&I Code Sections 16933.1, 16933(c)(1), and 16955(d))

#### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT ADMINISTRATIVE COSTS**

- 28. Should the County choose to use some or all of the PS funds specified in paragraph 25 of this Article to establish an EMS fund, the County shall expend no more than ten percent (10%) of the amount deposited in the PS Account of the EMS fund pursuant to paragraph 26 for costs of administering the PS account.

(W&I Code Sections 16933(c)(1) and 16952(d))

#### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT EXPENDITURES**

- 29. Should the County choose to use some or all of the Physician Services funds specified in paragraph 25 of this Article to establish an EMS fund, the County shall provide a reasonable basis for its estimate of PS Account funds in the EMS fund which are encumbered to reimburse physicians losses incurred during the fiscal year for which bills shall not be received until after the fiscal year and agrees to expend or disencumber these funds prior to the submission of the report of actual expenditures required by W&I Code Section 16938.

(W&I Code Sections 16933(c)(1) and 16952(a)(2))

#### **EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT PROCEDURES**

- 30. Should the County choose to use some or all of the PS funds specified in paragraph 25 to establish an EMS fund, the County shall:

- (a) Establish procedures and time schedules for submission and processing of reimbursement claims submitted by physicians.

(W&I Code Sections 16933(c)(1) and 16956(a))

- (b) Establish schedules for payment which shall provide for disbursement of the funds available in the PS Account of the EMS fund periodically and at least annually to all physicians who have submitted claims containing accurate and complete data for payment by the dates established by the County.  
(W&I Code Sections 16933(c)(1) and 16956(b))
- (c) Deny, at its discretion, claims which are not supported by records and recover any reimbursement paid to any physician for claims which lack supporting records.  
(W&I Code Sections 16933(c)(1) and 16956(c))
- (d) Require a listing of patient names to accompany a physician's claim, and give full confidentiality protection to those names.  
(W&I Code Sections 16933(c)(1) and 16956(e))
- (e) Require physicians to notify the administering agency if, after receiving payment from the PS Account of the EMS fund, the physicians are reimbursed by patients or responsible third-parties. In these instances, the County assures it shall reduce the physician's future payment of claims from the account or, in the event there is not a subsequent submission of a claim for reimbursement within one year, require the physicians to reimburse the PS Account of the EMS fund in an amount equal to the amount collected from the patient or third-party payer but not greater than the amount of reimbursement received from the PS Account of the EMS fund for the patient's care.  
(W&I Code Sections 16933(c)(1) and 16958)
- (f) Require physicians who submit claims for funding from the PS Account of the EMS fund to keep and maintain records of the services rendered, the person to whom services were rendered, and any additional information the administering agency may require, for a period of three years after the services were provided.  
(W&I Code Sections 16933(c)(1) and 16957)

### **NEW CONTRACTS**

- 31. (a) The difference between the PS amount received in paragraph 25 and the amount transferred to the PS Account of the EMS fund pursuant to paragraph 26 shall be expended by the County for reimbursement or support of services, either directly or by contract, which are provided by physicians or groups of physicians during FY 2001-02.  
(W&I Code Sections 16933(c)(3) and (d))

- (b) The County shall require physicians who receive funds specified in paragraph 31 to stop any current, and waive any future, collection efforts to obtain reimbursement from the patient, upon receipt of those funds from the County.  
(W&I Code Sections 16933.1, 16933(c)(1) and 16955(d))

**EMERGENCY MEDICAL SERVICES FUND - PHYSICIAN SERVICES ACCOUNT - CONTRACT BACK**

- 32. Should the County choose to contract back with the Department to administer its PS Account in its EMS fund, it shall:
  - (a) Transfer all funds specified in paragraph 25 to the Department under such conditions as the Department may require.  
(W&I Code Sections 16933(c)(2), and 16952(c))
  - (b) Assure uniform program standards and operating and reimbursement policies regarding the PS Account in the EMS fund which shall be mutually established by the participating counties in conjunction with the Department and which shall include but not be limited to eligibility levels, payment of claims, and deposit or transfer of funds administered.  
(W&I Code Sections 16933(c)(2), 16935(d), and 16952(c))

**OTHER HEALTH SERVICES FUNDS - PURPOSE**

- 33. The County agrees to expend all of its 2001-02 Other Health Services allocation received pursuant to W&I Code Section 16933 to maintain and enhance health care services which are:
  - (a) Provided during FY 2001-02.
  - (b) Specified in W&I Code Sections 14021 and 14132, and in Divisions 1 (commencing with Section 100) and 4 (commencing with Section 3000) of the Health and Safety Code, and
  - (c) Provided to patients who cannot afford to pay for those services, and for whom payment shall not be made through private coverage or by any program funded in whole or in part by the federal government.  
(W&I Code Sections 16933(a) and (b), 16931(a), and 16961)

### **OTHER HEALTH SERVICES FUNDS - CONSIDERATIONS AND LIMITATIONS**

34. No more than five percent (5%) of the Other Health Services fund specified in paragraph 33 or fifty thousand dollars (\$50,000), whichever is greater, shall be expended for costs related to the purchase of equipment and fixed assets and that no single expenditure shall exceed ten thousand dollars (\$10,000).  
(W&I Code Sections 16933(b) and 16960(b))
35. Consideration shall be given to city public health departments within the County in the use of Other Health Services funds specified in paragraph 33.  
(W&I Code Section 16960(a))

### **CONTRACTUAL CONSIDERATIONS AND LIMITATIONS**

36. The Department or County may terminate this Agreement by giving at least thirty (30) days written notice to the other party. The notification shall state the effective date of termination.
37. Nothing in this Agreement shall be interpreted to require additional expenditures of County funds for health services beyond those required herein. Also, nothing in this Agreement shall be interpreted to relieve the County of its other obligations to provide health care services to its residents.
38. This Agreement may be amended to conform to any applicable changes in the statutes governing the funds and programs covered in this Agreement.
39. Section 86 of SB 391 (Chapter 294, Statutes of 1997) is hereby incorporated by reference into this Agreement. Reductions in appropriations for RHS pursuant to Section 86 shall be prorated among the RHS Counties and the allocations under paragraphs 9, 10, 12, 15, 25, and 33 shall be reduced accordingly upon notification by the Department.

### **APPEAL PROCESS**

40. The County may appeal a decision involving the RHS Program by writing to the Department within twenty-one (21) working days of receipt of written notification. The County's appeal shall be directed to the Department's Chief of the Medically Indigent Services Section. The appeal must clearly describe the issue(s) in question, the fiscal year applicable and include all supporting documentation. The Department shall issue a written decision to the County. The County may, within twenty-one (21) working days of receipt of this decision, pursue a second level appeal. The County must direct the second level appeal to the Department's Chief of the Office of County Health Services.

The second level appeal must clearly describe the issue(s) in question, the fiscal year applicable and include all supporting documentation. The Chief of the Office of County Health Services has the authority to overrule any part or all of the first level appeal decision. The second level appeal decision is precedent and overrules the first level appeal decision. The Department shall issue a written decision to the County. There is no other level of appeal within the Department.

**THIS AGREEMENT FOR FUNDING HAS BEEN SIGNED BY THE COUNTY'S GOVERNING BODY AND IS HEREBY EXECUTED.**

<b>State of California</b>	<b>County of «County»</b>
<b>Signature:</b>	<b>Signature:</b>
<b>Name: George B. (Peter) Abbott, M.D., M.P.H.</b>	<b>Name:</b>
<b>Title: Chief, Office of County Health Services</b>	<b>Title:</b>
<b>Date:</b>	<b>Date:</b>